



LFW

Attorney's Docket No.: 42P18777

Patent

In re the Application of: Gregory S. Clemons

(inventor(s))

Application No.: 10/814,571

Filed: March 31, 2004

For: PROCESS FOR MICRO-GROOVING A POLYMER ALIGNMENT LAYER FOR A LIQUID CRYSTAL DISPLAY

(title)

Mail Stop Amendment
Commissioner For Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

SIR: Transmitted herewith is an Amendment for the above application.

 Applicant claims small entity status. See 37 CFR 1.27.

XX No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
	Claims Remaining After Amd.		Highest No. Previously Paid For	Present Extra
Total Claims	* 17	Minus	** 29	0
Indep. Claims	* 2	Minus	*** 3	0
<div></div>	First Presentation of Multiple Dependent Claim(s)			

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

SMALL ENTITY	
Rate	Additional Fee
X25	\$
X100	\$
+180	\$
Total Add. Fee	\$

OTHER THAN A SMALL ENTITY	
Rate	Additional Fee
X50	\$ 0
X200	\$ 0
+360	\$
Total Add. Fee	\$ 0

Certificate of Mailing: I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450

on April 9, 2007
Date of Deposit

Elizabeth J. Martinez
Name of Person Mailing Correspondence

Elizabeth J. Martinez
Signature

April 9, 2007
Date

_____ A check in the amount of \$ _____ is attached for presentation of additional claim(s).
_____ Applicant(s) hereby Petition(s) for an Extension of Time of _____ month(s) pursuant to
37 C.F.R. § 1.136(a).

_____ A check for \$ _____ is attached for processing fees under 37 C.F.R. § 1.17.

_____ Please charge my Deposit Account No. 02-2666 the amount of \$ _____.

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X Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of
extra claims.

X Any extension or petition fees under 37 C.F.R. § 1.17.

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

Date: 4-9-07

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